

DLA Award Values and Evidence Use for New Claims in 2010, in Great Britain.

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Background

Disability Living Allowance (DLA) is a benefit that provides a cash contribution towards the extra costs of needs arising from an impairment or health condition. DLA is a non-means-tested benefit payable regardless of employment status. It is part of a wider range of support and services available to disabled people, including support with housing and Council Tax costs, and in the form of services or direct payments from Local Authorities to meet social care needs.

Although it is intended to contribute towards extra costs, measuring each individual's expenditure would be administratively complex and expensive. Entitlement and award levels are, therefore, based on proxies – care and mobility – as research at the time of DLA's introduction showed that they were the greatest sources of extra costs¹. The decision about whether to award benefit is not made on the basis of an individual's costs, but on the severity of their care and mobility needs.

To apply for DLA, individuals complete a claim form which requests detailed information about the impact of their impairment or health condition on their ability to manage their care themselves and/or get around. If a claimant has a progressive disease and is not expected to live for more than another six months, there are Special Rules for claiming the benefit to make sure it is processed more quickly and easily.

The claim form is considered by a Decision Maker who either awards or turns down the claim. Awards are currently payable at two mobility and three care rates leading to a possible 11 different combinations of payable rates of benefit. Awards can be made for any duration, including indefinitely. Awards are reviewed if an individual reports a change, but there is currently no process to systematically review all awards.

Further information on DLA is available at:

<http://www.direct.gov.uk/en/DisabledPeople/FinancialSupport/DisabilityLivingAllowance>

The Department also publishes a range of National Statistics on DLA recipients at <http://research.dwp.gov.uk/asd/index.php?page=tabtool>.

This publication presents additional Pension, Disability and Carers Service (PDCS) management information on DLA evidence use and average monetary award values.

¹ Office of Population Censuses and Surveys, *The financial circumstances of disabled adults living in private households*, 1988.

Methodology

The results given in this report are Management Information collected by the Pension, Disability and Carers Service (PDCS). DWP's preference is to provide Official/National Statistics, but in this case we only have Management Information available. It is not quality assured to the same extent as Official/National Statistics.

Table 1: Average Monetary Award Value for and Total DLA Payments for Successful DLA New Claims, 2010.

When a new claim decision is made for DLA, the PDCS Decision Maker will consider whether he/she can make their decision based on the claim form alone. If not, the Decision Maker will request further evidence, for example, he/she may contact the claimant, or the claimant's GP, or may contact a relevant third party for more information.

This analysis presents the average monetary value of new DLA awards made during 2010, and shows a breakdown of this information according to which further evidence was used in making the award decision.

This table also shows an estimate of the total DLA payments made during 2010 to those claimants who were newly awarded DLA in 2010. These expenditure figures are a multiplication of the average award value, the number of people who were awarded this amount during 2010, and the average duration that these people spent on benefit during 2010 which is 26 weeks.

It is important to note that there is not a causal relationship between evidence and award value, in other words further evidence does not directly lead to a higher award. Rather, the claims for which further evidence is required are different from those where it is not required. For example, a report from a medical professional is always required in Special Rules cases for claimants with limited life expectancy, and these cases are automatically awarded Higher Rate Care.

The source of these figures is PDCS Management Information. We know that this data source does not capture all decisions, however over 90% of new claim decisions are recorded in this data. This limitation means that we do not report volumes using this data source but only report proportions.

Table 2: Evidence Used in DLA New Claim Decisions, 2010.

A breakdown of all DLA new claims in 2010, according to the main source of evidence used to make the decision is shown in Table 2.

More than one piece of evidence can be used in making a DLA decision. For each claim, the Decision Maker records the type of evidence which they considered to be the main source which led to the decision.

As for Table 1, due to limitations of the PDCS Management Information we do not report volumes using this data source but only report proportions.

Results

These figures show data for new DLA claimants of all ages (0-64) for the period January to December 2010, in Great Britain.

The source of all figures is Pension, Disability and Carers Service Operational Management Information.

Due to the limitations of this data source covered in the Methodology section above, these results should be treated as estimates only.

Table 1: Average Monetary Award Value and Total DLA Payments for Successful New Claims, 2010.		
	Average Award for Successful Claimants in 2010	Total Payment to These Claimants During 2010
DLA Award Made Using Claim Form Only	£58.80 / week	£30m
DLA Award Made Using a GP Report	£79.00 / week	£150m
DLA Award Made Using a Medical Examination Report	£59.80 / week	£10m
DLA Award Made Using Other Sources of Evidence	£64.90 / week	£130m
All New DLA Awards in 2010	£69.90 / week	£320m

Notes:

1. Weekly expenditure figures have been rounded to the nearest ten pence and 2010 expenditure figures to the nearest £10million.
2. Other Sources of Evidence can include phone calls to the claimant or their Carer, the claimant's Personal Care Support Plan, information from a Social Worker, or from an Occupational Therapist, Physiotherapist or other Allied Health Professional, information obtained as part of the claimant's application for Incapacity Benefit or Employment and Support Allowance, or information obtained from a Hospital report.
3. Claims under the Special Rules are included in the "Award Made Using a GP Report" category.
4. The Total Payment column shows the total DLA payments made during 2010 to those claimants who were newly awarded DLA in 2010.

DLA Award Values and Evidence Use for New Claims in 2010

	Claim Form Only	General Practitioner Report	Medical Examination Report	Other Source of Evidence
Percentage of New Claim Decisions, 2010	16	42	6	36

Notes:

1. More than one piece of further evidence can be used to make the DLA decision. This table indicates the evidence which the Decision Maker considered to be the main source used to make the decision.
2. Other Sources of Evidence include phone calls to the claimant or their Carer, the claimant's Personal Care Support Plan, information from a Social Worker, or from an Occupational Therapist, Physiotherapist or other Allied Health Professional, information obtained as part of the claimant's application for Incapacity Benefit or Employment and Support Allowance, or information obtained from a Hospital report.
3. Claims made under the Special Rules are included in the General Practitioner Report column.

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